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APPLICANTS

Darren L. Anand, Essex Junction, VT;
 John R. Goss, So. Burlington, VT;
 Peter O. Jakobsen, Lakewood, CO; *M*
 Michael R. Ouellette, Westford, VT;
 Thomas G. Sopchak, Williston, VT;
 Donald L. Wheater, Hinesburg, VT;

**** CONTINUING DATA ********None M***** FOREIGN APPLICATIONS ********None M***IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>M</i>		
Verified and Acknowledged	Examiner's Signature <i>M</i> Initials		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
VT	3	<i>38</i> <i>23</i>	<i>5</i> <i>7</i>

ADDRESS

29154

TITLE

DIAGNOSTIC METHOD AND APPARATUS FOR NON-DESTRUCTIVELY OBSERVING LATCH DATA

FILING FEE RECEIVED 2552	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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